STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT					
State/Territory: Arizona					
Optional Sliding Scale Premiums Imposed on Qualified Disabled and Working Individuals A. The following method is used to determine the monthly premium imposed on qualified disabled and working individuals covered under section					
1902(a)(10)(E)(ii) of the Act:					
N/A					
B. A description of the billing method used is as follows (include due date for premium payment, notification of the consequences of nonpayment, and notice of procedures for requesting waiver of premium payment):					
N/A					
*Description provided on attachment. TN No. 92-25 Supersedes Approval Date 3 3093 Effective Date October 1, 1992 TN No. None HCFA ID: 7986E					

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	STATE PLAN U	NDER TITLE XIX OF TH	E SOCIAL SECURITY ACT	
	State/Territor	y: Arizona		
C. State	or local funds	under other programs	are used to pay for pre	miums:
<u></u>	Yes	/ No		
		N/A		
a pre	riteria used for mium because it ibed below:	determining whether would cause an undue	the agency will waive p hardship on an individu	ayment of al are
		<i>t</i> .	•	
		N/A		
	•	·		
•				
				e to to
*Descript:	lon provided on	attachment.		
Supersedes	Approval	Date 3 30 93	Effective Date Octobe	r 1, 1992

HCFA ID: 7986E